

Central Bank of Bahrain

Form 3: Application for Approved Person Status

(Application for approved person status in the Kingdom of Bahrain)

This form was last updated in October 2017

Form 3: Application for Approved Person Status

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Form 3: INSTRUCTIONS

PLEASE NOTE:

- 1. All persons wishing to undertake a controlled function in an investment business licensee must be approved by the CBB prior to their appointment.
- 2. This application form should be completed by referring to Volume 4 (Investment Business) of the CBB Rulebook, in particular Module AU (Authorisation). The rules applicable to Approved Persons are found in Section AU-1.2, Chapter AU-3 and Section AU-5.2.
- Applicants should satisfy themselves that they meet the requirements of the Rulebook before submitting an application, including the minimum qualifications and competency requirements outlined in Module TC (Training and Competency). This form contains the principal elements that are required, but should applicants consider that there is additional evidence of relevance to the application, this should be submitted with this form. It should not be assumed that information is known to the CBB merely because it is in the public domain or has previously been disclosed to the CBB or another regulatory body. If there is any doubt about the relevance of information, it should be disclosed.
- 4. Complete all sections as fully as possible, attaching supporting documentation and continuation sheets where appropriate. The application should be written in blue ink in BLOCK CAPITALS or typed. It must be signed personally by the applicant in blue ink, and stamped with the company's seal on each page.
- 5. Failure to provide all the required information may result in significant delays in processing. The CBB does not accept responsibility for any loss caused to the applicant by any delay.
- 6. All documentation provided to the CBB must be in either the Arabic or English languages. Any documentation in a language other than English or Arabic must be accompanied by a certified English or Arabic translation thereof.
- 6A. The application form must be accompanied by certified copies of original identification documents which contain a photograph of the concerned applicant, the applicant's full name and details of date of birth. These would include passport and/or identity card from home country of the applicant. Any document copied for the purpose of identification verification must be original. Certification must be performed by an official of the concerned licensee (if already licensed), a lawyer, or a Government body such as an Embassy or Ministry. Certification may also be made at the CBB subject to the submission of the original documents. The certification must include the words "original sighted" together with a date and signature of the concerned authorised official (along with corporate stamp where applicable). The certifier's contact details should be clearly available (e.g. business card) with the certification.
- 6B. These are the documents that must be submitted:

Section I: Page 2 of 2 - Certified copies of original identification documents (passport and/or identity card).

Section III: Page 1 of 3 – Original or certified copies of educational and professional certificate(s). Page 2 of 3 - CV.

Section IV: Page 7 of 7 – Recent Credit Reference Report.

Instructions: Page 1 of 3

Form 3: INSTRUCTIONS

- 7. If any question is not applicable given your particular circumstances, please clearly indicate by marking 'N/A', with an explanation as to why it does not apply. Please provide a full explanation for any question that cannot be answered at this stage. Please note that failure to provide the required information may prejudice an application and will cause delay.
- 7A. For existing licensees applying for the appointment of a Director or the Chief Executive/General Manager, the Authorised Representative should be the Chairman of the Board or a Director signing on behalf of the Board. For all other controlled functions, the Authorised Representative should be the Chief Executive/General Manager.
- 8. Where the request for approved person status *forms part of a new license application*, the **original** completed form, together with supporting (certified) documentation, should be submitted to:

The Director, Licensing & Policy Directorate Central Bank of Bahrain PO Box 27 Manama Kingdom of Bahrain

9. Where the request is in relation to an *existing investment business licensee (except when dealing with a MLRO)*, the **original** completed form, together with supporting (certified) documentation, should be submitted to:

The Director, Financial Institutions Supervision Directorate Central Bank of Bahrain PO Box 27 Manama Kingdom of Bahrain

9A. Where the request is in relation to an *existing investment business licensee dealing with a MLRO*, the **original** completed form, together with supporting (certified) documentation, should be submitted to:

The Director, Compliance Directorate Central Bank of Bahrain PO Box 27 Manama Kingdom of Bahrain

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Form 3: INSTRUCTIONS (continued)

10. Queries may be addressed to:

For applications that form part of a new license application:

The Director, Licensing & Policy Directorate

Tel: +973 17 547605 Fax:+973 17 537554

E mail: albassam@cbb.gov.bh

For applications that are for an existing investment business licensee, other than MLRO

The Director, Financial Institutions Supervision

Directorate

Tel: +973 17 547968 Fax: +973 17 531636

E-mail: earrayed@cbb.gov.bh

For applications that are for an existing investment business licensee, dealing with

MLRO

The Director, Compliance Directorate

Tel: +973 17 547107 Fax: +973 17 535673

E-mail: compliance@cbb.gov.bh

10A. For applications dealing with MLRO or DMLRO, please clearly state in Question 4 under Section II – Details of Controlled Function – if the applicant's position will be combined with any other position within the investment business licensee.

11. Applicants are reminded that providing to the CBB any information which is false or misleading in connection with the submission of this application or any related information, may result in the withdrawal of approved person status or other disciplinary measures.

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Form 3: DECLARATION

I certify that the information in this Form 3 is accurate and complete to the best of my knowledge and belief and that there are no other facts relevant to this application of which the Central Bank of Bahrain (CBB) should be aware.

I authorise the CBB to make such enquiries and seek further information it deems necessary in considering this application for approved person status.

I am aware that providing to the CBB any information which is false or misleading in connection with an application for approved person status is an offence under the CBB Law, Decree No. (64) of 2006 (as amended) and any regulations issued thereunder. Such action, may result in the withdrawal of approved person status or other disciplinary measures.

I also confirm that I will not assume the responsibilities of the approved person for which this application is being submitted prior to obtaining such approval.

Should my application be approved by the CBB, I undertake to comply with all relevant provisions of the Bahrain Commercial Company Law (2001) (as amended), the CBB Law, Decree No. (64) of 2006 (as amended) and CBB Regulations and Rules issued.

I undertake to inform the CBB and the licensee of any changes material to the application that may arise while the CBB is considering the application. I further undertake that, in the event that the approved person status being sought is granted, I will notify the CBB and the licensee of any material changes to or affecting the completeness or accuracy of, the information provided in this Form 3 as soon as possible, but in any event no later than 21 days from the day that the changes come to my attention.

Name of applicant (please print name)	Signature of applicant	Date
	(Do not sign in black ink)	

Note: The use of the term 'applicant' throughout this form refers to the individual seeking the Approved Person Status.

Special Declaration for prospective Members of the Board of Directors

I certify that as prospective Director of [insert name of licensee] I have read and fully understand my role and responsibilities as outlined in Module HC (High-level Controls) of Volume 4 of the CBB Rulebook.

		
Name of applicant (please print name)	Signature of applicant	Date

Form 3: Application for Approved Person Status *Declaration: Page 1 of 1*

Applicant:

Form 3: Contact Information

Please provide full contact details of the applicant and an authorised representative of the licensee (e.g. Board member or senior management) or of the person seeking a license with whom the CBB can communicate with, regarding this application.

Name:		
Title: (Mr. M	rs. Ms.)	
Tel:		
Fax:		
E-mail:		
	wed the information given by the applicant on this form that such answers are, in our opinion, co	
Authorised Re	epresentative of the Licensee/Licensee Applicant	t:
Name:		-
Title: (Mr. M	rs. Ms.)	
Position Title:		
Tel:		_
Fax:		-
E-mail:		-
Signature:		-
Date		-
Company Stan	ip:	

Form 3: Section I – Applicant Details

1. Name(s) of the investment business licensee(s) in respect of which this application for approved person status is being made:
2. Title of position for which this application is being submitted:
3. Name of the applicant for approved person status: First Names: Family Name: Gender: Male Female
4. Has the applicant had any previous name (s) by which he (she) is known? Yes No If yes, please specify
5. Date and place of birth:
Place Date: DayMonthYear 6. Nationality of applicant:
7. Nationality of and name(s) of applicant's spouse: Name of spouse:
Nationality of spouse:

Form 3: Section I – Applicant Details (continued)

	h the applicant's current address please list all previous private he last 10 years with relevant dates:			
Date	Address			
9. Identity card; P number and country	Personal number; National Insurance number; and/or Social Security ry of issue:			
Type (e.g. Identity	card, social security number, etc.):			
Number: Country of issue:				
10. Passport Information:				
Passport Number:	Place of issue:			
Date of issue: Date of expiry:				
11. Please attach a certified copy of your passport or identity card. Please see instructions Paragraph 6A. for certification.				
(Note that the identification document must contain a photograph and be certified by one of the following: (a) a registered lawyer; (b) a registered notary; (c) a chartered accountant; (d) a government ministry; (e) an official of an embassy or consulate; or (f) an official of a CBB licensee. The individual providing the above certification must include clear contact details (e.g. business card or company stamp). Attached Yes				



Form 3: Section II – Details of Controlled Function

1. Controlled function(s) for which application is sought (Ref: Section AU-1.2):
☐ Member of the Board of Directors
☐ Chief Executive / General Manager
☐ Head of Function
□ Compliance Officer
☐ Money Laundering Reporting Officer
☐ Member of Shari'a Supervisory Board
☐ Financial Instruments Trader
☐ Investment Consultant / Adviser
2. If the form is being completed for a Member of the Board of Directors, please tick √ one of the following (Ref: Glossary in Part B of Volume 4 for the definition of each term below):
☐ Executive Director
□ Non-Executive Director
☐ Independent Director
Provide the rationale supporting the selected box for 'Director'
3. Specify responsibilities of the proposed controlled function:

Form 3: Section II - Details of Controlled Function

4. Will the applicant be handling /assuming other responsibilities from Bahrain?				
☐ Yes Please specify	□No			
5. The applicant has him/her:	s been made fully aware of the responsibilities assigned	l to		
□ Yes	□No			

Form 3: Section III – Qualifications & Experience

1. Please provide details of any academic and professional qualifications and the year and place in which these were obtained (with originals or certified copies of certificates and translations if not in Arabic or English).			
Original or Co	ertif	fied Copies Attached Yes□	
Membership N	lo.	Professional Qualification	Year Obtained
Academic Qualification	1	Educational Establishment	Year Obtained
2. Please provide details of any further relevant qualifications (not covered in Question III.1) and the year and place in which these were obtained (with originals or certified copies of certificates and translations if not in Arabic or English).			
Original or Certified Copies Attached Yes□			
Qualification		Educational Establishment	Year Obtained

Form 3: Section III – Qualifications & Experience (continued)

_	ovide details of cur s(es) and the year o	rent membership of any f admission.	relevant profes	ssional bodies,
Name of Pro	ofessional Body	y Address		Year of Admission
If additional	l professional bodies	s, please complete an ado	ditional sheet.	
and employ employer, to	ment over the pass he nature of the bu	at employment, please part 10 years, including the asiness, the position he ease account for any ga	e full name ar ld and the relev	nd address of the vant dates (please
Period Covered	Name of Employer ¹	Address	Nature of Business	Position Held
If additional	l employment exper	ience, please complete a	n additional she	et.
11 audiuvila	ampioyment exper	ichec, picase complete a	n auunuviiai sile	· · ·

¹ If self-employed, mark as self-employed.

Form 3: Section III – Qualifications & Experience (continued)

5. Please provide details of any body corporate of which the applicant is currently a				
director, controller, manager, or company secretary, and the countries in which they are				
registered. Please state whether any of these positions will be retained if the Approved				
Person Status is granted.				
Name of Corporate Body	Position Held		Country of	
			Registration	
	Executive Director	7		
	Non-Executive Director	7		
	Independent Director	7		
	Controller (as defined in	T		
	country where position is held):			
	Significant controller			
	Assuming a control			
	function			
	Manager	Ī		
	Company Secretary	Î		
	Executive Director	7		
	Non-Executive Director	7		
	Independent Director			
	Controller (as defined in	Ĭ		
	country where position is held):			
	Significant controller			
	Assuming a control			
	function			
	Manager			
	Company Secretary	1		
If additional corporate positi	ons are held, please complete a	n additio	onal sheet.	
6. Are you (or have you been	n) an approved person in Bahra	ain or ot	ther jurisdiction?	
□ Yes □N	lo T	1		
Period	Controlled Function		Authority (ies)	

Form 3: Section IV - Personal Background

1. Name of companies or businesses that the applicant or member of the applicant's family ² owns 20% or more or where the applicant has a controlling interest.					
Name of Business, Address and Telephone Number	Nature of Business	Country of Incorporation			
If additional businesses, please complete an additional sheet.					
1A. Does the applicant have any relationship (whether family or business) with any of the approved persons (as defined in the Glossary) of the licensee?					
Yes□ No □					
If yes, please provide details of the exact nature of the relationship with the approved person.					

² The term "family" refers to father, mother, husband, wife, children, grandparents and grandchildren.

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2. Are there any applicant?	outstanding litigation and/or any current proceedings against the
Yes □	No 🗆
If yes, please prov	de details.
3. Are there any ju	dgement against the applicant?
Yes □	No \square
If yes, please prov	de details.

which the applicant h company secretary, e	r any body corporate, partnership or unincorporated institutions, or has been associated with as a director, controller, manage ver applied to any regulatory authority in any jurisdiction for ity to carry on investment business activity or occupy a control rson)?	r or or a
$\mathrm{Yes}\square$	No 🗆	
If yes, please list a unsuccessful.	applications showing whether they have been successful	or
competent jurisdictio	at any time been convicted of any felony or crime by any cour , including civil or military (excluding any minor traffic offerner honesty and/or integrity unless he/she has subsequently bing?	ıce)
$\mathrm{Yes} \square$	No □	
• • •	particulars of the court by which the applicant was convicted, imposed and the date of conviction, as well as evidence of hav standing.	
	been the subject of any adverse finding in a civil action by a isdiction, relating to fraud?	any
$\mathrm{Yes}\square$	No □	
	particulars of the court by which the applicant was convicted, y imposed and the date of conviction.	the
		- - -

court or competent jurisdiction	abject of any adverse finding in a civil action by any relating to misfeasance or other misconduct in management of a corporation or partnership?
Yes	No 🗆
If yes, please give full particulars offence and the penalty imposed a	of the court by which the applicant was convicted, the and the date of conviction.
of Law or by any officially appo	insured, disciplined or publicly criticised by any Court inted enquiry whether in the Kingdom of Bahrain or body or trade association to which the applicant has regulatory order?
Yes□	No 🗆
If yes, please give full particulars the party having taken this action.	of the action taken, where and when it took place and
	any financial services legislation or been the subject of stigations and/or fines by a governmental, professional ation?
$\mathrm{Yes}\square$	No \square
If yes, please give full particulars the party having taken this action.	of the action taken, where and when it took place and

applicant has, or has been asso secretary contravened any fi	partnership or unincorporated institution to which the ociated with as a director, controller, manager or company nancial services legislation or been the subject of any stigations and/or fines by a governmental, professional or riation?
$\mathrm{Yes}\square$	No 🗆
If yes, please give full particulate the party having taken this act	lars of the action taken, where and when it took place and ion.
8. Has the applicant ever been	the subject of a disciplinary enquiry?
$\mathrm{Yes}\square$	No □
If yes, please give full particulate the party having taken this act	lars of the action taken, where and when it took place and ion.
9. Has the applicant ever been	suspended from any office, or asked to resign?
$\mathrm{Yes}\square$	No \square
If yes, please give full particul	ars of the action taken, where and when it took place.

10. Has the applicant been disminentry to any profession or occupate	issed from any office or employment or barred from tion?
$\mathrm{Yes}\square$	No □
If yes, please give full particulars	of the action taken, where and when it took place.
	disqualified from acting as a director of a company or conduct or the affairs of any company, partnership or
$\mathrm{Yes}\square$	No 🗆
If yes, please give full particulars	of the action taken, where and when it took place.
12. Has the applicant been adjudg	ed bankrupt by a court?
$\mathrm{Yes}\square$	No □
• • •	of the action taken, where and when it took place and nt has met all his/her obligations in the last 10 years applishments.
13A. Has the applicant ever at any order resulting from a business re	y time failed to satisfy a judgement debt under a court lationship?
$\mathrm{Yes}\square$	No □
If yes, please give full particulars	of the action taken, where and when it took place.

13B. Has the applicant been the subject of any adverse finding in a court or competent jurisdiction relating to fraud?	civil action by any
Yes □ No □	
If yes, please give full particulars of the action taken, where and whe	en it took place.
14. Has the applicant, in connection with the formation or manage corporate, partnership or unincorporated institution been adjudged liable for any fraud, misfeasance or other misconduct by the application body or company or toward any members thereof?	by a court civilly
Yes□ No □	
If yes, please give full particulars of the action taken, where and whe	en it took place.
15. Has the applicant or any body corporate, partnership or uninco with which the applicant is or was associated as a director, controlle or company secretary been compulsorily wound up or made arrangement with its creditors or ceased trading in circumstances wh not receive or have not yet received full settlement of their claim applicant was associated with it or within one year after the applicant with it?	er, manager, partner a compromise or here its creditors did has, either while the
Yes□ No □	
If yes, please give full particulars of the action taken, where and whe	en it took place.
-	

16. In carrying out his/her duties will the applicant be acting on the directions or instructions of any other person(s)?
Yes□ No □
If yes, please give full particulars.
17. Provide the name and address of one or more bankers as a reference for the CBB to
obtain information on the conduct of your financial affairs over the past 5 years:
18. Has the applicant ever been a director, partner or manager of a corporation which has been liquidated or under administration?
Yes□ No □
If yes, please give full particulars of the situation, including where and when it took place.
19. Please provide a copy of a recent credit reference report.*
Attached Yes□

*Credit reference reports are any reports issued by any of the credit reference bureaus based upon a request by a customer of the members of the credit reference bureau and which includes credit information indicating the credit worthiness of the customer.

Form 3: Section V – Chairman and Non-Executive Directors only

1. How much time will the applicant give to the work of the investment business licensee?
2. What particular contribution does the applicant believe he will bring to the work of the investment business licensee?